WEST VIRGINIA DIVISION OF LABOR 1900 KANAWHA BOULEVARD EAST CAPITOL COMPLEX, BUILDING 3, ROOM 200 CHARLESTON, WEST VIRGINIA 25305

IRREVOCABLE LETTER OF CREDIT WAGE PAYMENT BOND

Authorized by W. Va. Code §21-5-14(c)

| ISSUING BANK: |
|---|
| ADDRESS: |
| |
| BANK'S FEIN |
| IRREVOCABLE LETTER OF CREDIT NUMBER: |
| and who is insured by \square the Federal Deposit Insurance Corporation \square National Credit Union |
| Administration, hereby issues an Irrevocable Letter of Credit in the amount of |
| dollars (\$) on behalf of |
| EMPLOYER: |
| ADDRESS: |
| EMPLOYER'S FEIN: |
| for the benefit of the West Virginia Division of Labor. |
| The Employer is engaged in \square construction work or \square the severance, production or |
| transportation of minerals, and is required by the Wage Payment and Collection Act, W. Va. Code §21-5- |
| 14, to furnish a wage bond. As long as the Employer honors its statutory responsibility to pay employee |
| wages and fringe benefits when they are due, this Irrevocable Letter of Credit will not be drawn upon. It |
| the Employer defaults or otherwise fails to pay employee wages and fringe benefits as required by the |
| Wage Payment and Collection Act, the Bank or Credit Union guarantees that it will honor the Division of |
| Labor's demand for payment from this Irrevocable Letter of Credit upon the Employer's default or failure |
| to pay employee wages and fringe benefits. |

The Bank or Credit Union agrees to issue this Irrevocable Letter of Credit subject to the following terms and conditions:

- 1. That Bank or Credit Union will automatically renew the Irrevocable Letter of Credit until the Irrevocable Letter of Credit is released by the express written authorization of the Commissioner of the West Virginia Division of Labor;
- 2. That the Bank or Credit Union acknowledges that the West Virginia Division of Labor is the beneficiary, on behalf of the Employer's employees, of the Irrevocable Letter of Credit;
- 3. That the Bank or Credit Union will honor the Division of Labor's demand for payment from the Irrevocable Letter of Credit to pay the wages and fringe benefits upon the Employer's default;
- 4. That the Bank or Credit Union will not allow the Employer or anyone else to make withdrawals against the Irrevocable Letter of Credit without the express written authorization of the Commissioner of the West Virginia Division of Labor.

| | Executed this day of _ | | · · · · · · · · · · · · · · · · · · · |
|-----|--|-------|---------------------------------------|
| By: | | , its | |
| • | Printed Name | | Title |
| | | | |
| | Original Signature | | |
| | Embossed Bank Or Credit Union Seal* | | |

If this document is executed by an official other than the Bank's or Credit Union's President or Vice President, the Board of Director's minutes authorizing that official to execute this document must be attached.

^{*}If the bank has not adopted a corporate seal, please submit a letter on bank letterhead stating such.

EMPLOYER'S AUTHORIZATION TO DRAW UPON THE IRREVOCABLE LETTER OF CREDIT FOR FAILURE TO PAY EMPLOYEE WAGES AND FRINGE BENEFITS

| I, | | , in my capacity as \square sole proprietor |
|----------------------------|----------------------------|--|
| | Name of Individ | dual |
| □member □partner | □president | □ vice president ofName of Employer |
| engaged in □ construction | on work or \square the s | severance, production or transportation of minerals, |
| understand thatNa | me of Employer | is required by the Wage Payment and Collection Act, |
| W. Va. Code §21-5-14, to | o furnish a wage b | oond. |
| The Employer nar | med herein has po | osted Irrevocable Letter of Credit numbered |
| in the amount of \$ | | as a wage bond. |
| | | mployer named herein honors its statutory responsibility to when they are due, the Division of Labor will not draw upor |
| the Irrevocable Letter of | f Credit. If the E | Employer named herein defaults or otherwise fails to pay |
| employee wages and frin | nge benefits as rec | equired by the Wage Payment and Collection Act, I further |
| understand that the Di | vision of Labor | will use as much of the funds available pursuant to the |
| Irrevocable Letter of Cree | dit as necessary to | pay employee wages and fringe benefits. |
| I hereby expressly | y authorize the Di | ivision of Labor to use as much of the Irrevocable Letter of |
| Credit funds as necessary | to pay employee | wages and fringe benefits that are due and owing. |
| Executed this | day of | ,by |
| | | , its |
| Printed Name | | Title |
| Original Sig | nature | |

If the business named above is a corporation, this authorization must be executed by the President or Vice President or, if executed by another official, attach the minutes of the Board of Directors' meeting authorizing such official to execute this document on behalf of the corporation.

| STATE OF | |
|------------------------------|--|
| COUNTY OF | , TO WIT: |
| I,Printed Name of I | , a Notary Public in and for the county and state aforesaid, |
| do hereby certify thatPr | who, as inted Name of Person Signing for Principal Title of Person Signing for Principal |
| signed the foregoing wri | ting for, has this day, in my Principal |
| said county, before me, | acknowledged the said writing. |
| My commission of Notary Seal | Notary Public Signature |
| Appr | oved as to sufficiency of form and manner of execution this day of, 20 Attorney General of the State of West Virginia |